

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO | DATE     |
|---------------------------|----------|-------|----------|
| FEE DETERMINATION         |          |       |          |
| O.I.P.E. CLASSIFIER       |          |       |          |
| FORMALITY REVIEW          | CS       | 5C135 | 03/8     |
| RESPONSE FORMALITY REVIEW | RM       | 781   | 06-25-01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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